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TRANSMITTAL FORM

(to be used for all correspondence after initial filing)

Total Number of Pages in This Submission

5

Application Number	10/698,883
Filing Date	October 31, 2003
First Named Inventor	David B. Fallin
Art Unit	2632
Examiner Name	Nguyen, Tai T.
Attorney Docket Number	C4-1163

ENCLOSURES (Check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below):
<div>Remarks</div> <p>CUSTOMER CODE 26799</p>		

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Name	Tyco Fire & Security		
Signature			
Printed name	Frank A. Cona		
Date	December 16, 2004	Reg. No.	38,412

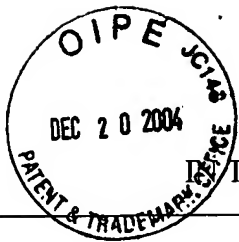
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Signature			
Typed or printed name	Mariah Moorhead	Date	December 16, 2004

This collection of information is required by 37 CFR 1.5. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to 2 hours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

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I hereby certify that the documents referenced herein are being deposited with the United States Postal Service, as First Class Mail, addressed to Mailstop Amendment, Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on December 16, 2004.

Mariah Moorhead (Depositor's Signature)

Mariah Moorhead (Depositor's Name)

In re Appln of: Fallin, et al.

Customer Code No.: 26799

Serial No.: 10/698,883

Art Unit: 2632

Filing Date: October 31, 2003

Examiner: Nguyen, Tai T.

Title: INTEGRATED ELECTRONIC ARTICLE SURVEILLANCE (EAS) AND POINT
OF SALE (POS) SYSTEM AND METHOD

Date: December 16, 2004

Mailstop Amendment
Commissioner for Patents
P.O. Box 1450
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Sir:

RESPONSE TO RESTRICTION REQUIREMENT

In response to the Restriction Requirement mailed December 7, 2004, Applicants hereby make the following election:

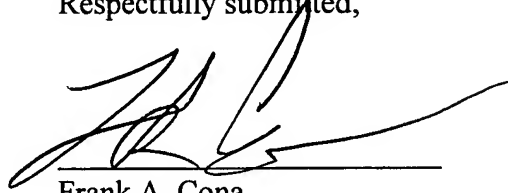
Applicants elect the claims of Group I (claims 1-12 and 22-44, drawn to a method for integrating POS data with EAS data, classified in class 340, subclass 572.1.

Applicants reserve the right to pursue the non-elected claims in a divisional application prior to issuance of a patent on the instant application.

If any additional issues arise which the Examiner believes would be best resolved by a telephone interview, he is invited to contact the undersigned attorney at the number given below.

The Commissioner is authorized to charge any fees or credit any overpayment to Deposit Account No. 19-1346. A duplicate copy of this sheet is enclosed.

Respectfully submitted,

A handwritten signature in black ink, appearing to read 'Frank A. Cona', written over a horizontal line.

Frank A. Cona
Reg. No. 38,412

MAILING ADDRESS:

Tyco Fire & Security Services
One Town Center Road
Boca Raton, Florida 33486
561-981-4366 (phone)
561-988-7843 (fax)